

7/18/02

UNITED STATES DISTRICT COURT FOR THE
NORTHERN DISTRICT OF ILLINOIS

FILED *clw*AUG 28 2008
AUG 28 2008MICHAEL W. DORRINS
CLERK, U.S. DISTRICT COURT

IN FORMA PAUPERIS APPLICATION
AND
FINANCIAL AFFIDAVIT

Alisha McDaniel
Plaintiff

v.

Shirell Turner 08 cv 4929

Officer Henry
Defendant(s)

08cv4929
JUDGE DER-YEGHIAYAN
MAGISTRATE JUDGE COLE

Wherever ☐ is included, please place an X into whichever box applies. Wherever the answer to any question requires more information than the space that is provided, attach one or more pages that refer to each such question number and provide the additional information. Please PRINT:

I, Alisha McDaniel, declare that I am the ☒ plaintiff ☐ petitioner ☐ movant (other ☐) in the above-entitled case. This affidavit constitutes my application ☒ to proceed without full prepayment of fees, or ☐ in support of my motion for appointment of counsel, or ☐ both. I also declare that I am unable to pay the costs of these proceedings, and that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of this petition/application/motion/appeal, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Question 2)
I.D. # 20080053535 Name of prison or jail: COOK COUNTY D.O.C.
Do you receive any payment from the institution? ☐ Yes ☒ No Monthly amount: _____

2. Are you currently employed? ☐ Yes ☒ No
Monthly salary or wages: 0
Name and address of employer: _____

a. If the answer is "No":
Date of last employment: 4-27-08
Monthly salary or wages: \$400.00 per month
Name and address of last employer: Trus on 63rd 63rd + Harper
Dine-in restaurant CHS 111 60615 773911-3571

b. Are you married? ☐ Yes ☒ No
Spouse's monthly salary or wages: _____
Name and address of employer: _____

3. Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same address received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.

a. Salary or wages: ☐ Yes ☒ No
Amount _____ Received by _____

- b. ☐ Business, ☐ profession or ☐ other self-employment ☐ Yes ☒ No
Amount _____ Received by _____
- c. ☐ Rent payments, ☐ interest or ☐ dividends ☐ Yes ☒ No
Amount _____ Received by _____
- d. ☐ Pensions, ☐ social security, ☐ annuities, ☐ life insurance, ☐ disability, ☐ workers' compensation, ☐ unemployment, ☐ welfare, ☐ alimony or maintenance or ☐ child support ☐ Yes ☒ No
Amount _____ Received by _____
- e. ☐ Gifts or ☐ inheritances ☐ Yes ☒ No
Amount _____ Received by _____
- f. ☐ Any other sources (state source: _____) ☐ Yes ☒ No
Amount _____ Received by _____

4. Do you or anyone else living at the same address have more than \$200 in cash or checking or savings accounts? ☐ Yes ☒ No Total amount: _____
In whose name held: _____ Relationship to you: _____

5. Do you or anyone else living at the same address own any stocks, bonds, securities or other financial instruments? ☐ Yes ☒ No
Property: _____ Current Value: _____
In whose name held: _____ Relationship to you: _____

6. Do you or anyone else living at the same address own any real estate (houses, apartments, condominiums, cooperatives, two-flats, three-flats, etc.)? ☐ Yes ☒ No
Address of property: _____
Type of property: _____ Current value: _____
In whose name held: _____ Relationship to you: _____
Amount of monthly mortgage or loan payments: _____
Name of person making payments: _____

7. Do you or anyone else living at the same address own any automobiles, boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? ☐ Yes ☒ No
Property: _____
Current value: _____
In whose name held: _____ Relationship to you: _____

8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute monthly to their support. If none, check here ☒ No dependents

Resident Funds Inquiry

Current User Name: PROGSERV Logout

ResId: 20080053535

Resident Id: 20080053535

Resident Name: TURNER, SHIRELL D. , ,

Date of Birth: 1982-06-12

Location: 03A -03 -15

Account Activity:

Prior History

Date	Transaction Type	Transaction Description	Amount	Balance	Due	Total
7/29/2008	BOOKED	ON THE NEW	0.00	0.00	0.00	0.00
7/28/2008	BOOKED	ON THE NEW	0.00	0.00	0.00	0.00